

# Dual Effect of Phosphate Transport on Mitochondrial $\text{Ca}^{2+}$ Dynamics\*

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**Background:** Inorganic phosphate ( $\text{P}_i$ ) buffers matrix  $\text{Ca}^{2+}$ , but its impact on mitochondrial  $\text{Ca}^{2+}$  handling is often overlooked.

**Results:** Mitochondrial  $\text{Ca}^{2+}$  uptake and buffering strictly depend on anion transport rates; ATP accelerates  $\text{P}_i$ -independent  $\text{Ca}^{2+}$  uptake.

**Conclusion:** Maximal  $\text{Ca}^{2+}$  uniporter rate and  $\text{Ca}^{2+}$  buffering are anion transport limited; ATP alters influx without being hydrolyzed.

**Significance:**  $\text{P}_i$  transport is fundamentally important in controlling mitochondrial  $\text{Ca}^{2+}$  signals.

The large inner membrane electrochemical driving force and restricted volume of the matrix confer unique constraints on mitochondrial ion transport. Cation uptake along with anion and water movement induces swelling if not compensated by other processes. For mitochondrial  $\text{Ca}^{2+}$  uptake, these include activation of countertransporters ( $\text{Na}^+/\text{Ca}^{2+}$  exchanger and  $\text{Na}^+/\text{H}^+$  exchanger) coupled to the proton gradient, ultimately maintained by the proton pumps of the respiratory chain, and  $\text{Ca}^{2+}$  binding to matrix buffers. Inorganic phosphate ( $\text{P}_i$ ) is known to affect both the  $\text{Ca}^{2+}$  uptake rate and the buffering reaction, but the role of anion transport in determining mitochondrial  $\text{Ca}^{2+}$  dynamics is poorly understood. Here we simultaneously monitor extra- and intra-mitochondrial  $\text{Ca}^{2+}$  and mitochondrial membrane potential ( $\Delta\Psi_m$ ) to examine the effects of anion transport on mitochondrial  $\text{Ca}^{2+}$  flux and buffering in  $\text{P}_i$ -depleted guinea pig cardiac mitochondria. Mitochondrial  $\text{Ca}^{2+}$  uptake proceeded slowly in the absence of  $\text{P}_i$  but matrix free  $\text{Ca}^{2+}$  ( $[\text{Ca}^{2+}]_{\text{mito}}$ ) still rose to  $\sim 50 \mu\text{M}$ .  $\text{P}_i$  (0.001–1 mM) accelerated  $\text{Ca}^{2+}$  uptake but decreased  $[\text{Ca}^{2+}]_{\text{mito}}$  by almost 50% while restoring  $\Delta\Psi_m$ .  $\text{P}_i$ -dependent effects on  $\text{Ca}^{2+}$  were blocked by inhibiting the phosphate carrier. Mitochondrial  $\text{Ca}^{2+}$  uptake rate was also increased by vanadate ( $\text{V}_i$ ), acetate, ATP, or a non-hydrolyzable ATP analog (AMP-PNP), with differential effects on matrix  $\text{Ca}^{2+}$  buffering and  $\Delta\Psi_m$  recovery. Interestingly, ATP or AMP-PNP prevented the effects of  $\text{P}_i$  on  $\text{Ca}^{2+}$  uptake. The results show that anion transport imposes an upper limit on mitochondrial  $\text{Ca}^{2+}$  uptake and modifies the  $[\text{Ca}^{2+}]_{\text{mito}}$  response in a complex manner.

Mitochondrial  $\text{Ca}^{2+}$  plays a central role in regulating cellular energy supply, redox balance and cell death (1, 2) yet many questions remain about the determinants of mitochondrial

$\text{Ca}^{2+}$  flux, including the full complement of molecular components (2), signaling pathways affecting influx or efflux (2), and mitochondrial free  $\text{Ca}^{2+}$  concentrations during low and high work conditions. Accurate determination of matrix  $\text{Ca}^{2+}$  is particularly important in the heart, where workload continuously varies, accompanied by dynamic changes in ATP hydrolysis rate,  $\text{Ca}^{2+}$ , and phosphate ( $\text{P}_i$ ).<sup>2</sup>

$\text{P}_i$  transport through the phosphate carrier (PiC) is fundamental for oxidative phosphorylation and affects the pH gradient across the inner membrane with the effective co-transport of protons. A less appreciated function of  $\text{P}_i$  is its obligatory role in modulating mitochondrial  $\text{Ca}^{2+}$  fluxes. The earliest descriptions of mitochondrial  $\text{Ca}^{2+}$  uptake/binding (3–5) noted that ATP,  $\text{P}_i$ , and  $\text{Mg}^{2+}$  could potentiate  $\text{Ca}^{2+}$  accumulation by mitochondria, but the mechanism by which these modulators acted was unclear.  $\text{P}_i$  has been reported to affect mitochondrial  $\text{Ca}^{2+}$  in several ways, including modulation of  $\text{Ca}^{2+}$  influx, efflux, and buffering. The conventional view is that  $\text{P}_i$  transport facilitates  $\text{Ca}^{2+}$  influx by dissipating the pH gradient that builds up during  $\text{Ca}^{2+}$  entry as the protonmotive force redistributes from  $\Delta\Psi_m$  to  $\Delta\text{pH}$  upon stimulation of proton pumping (6). After entry,  $\text{P}_i$  then participates in dynamically buffering matrix  $\text{Ca}^{2+}$  by the formation of  $\text{Ca}-\text{P}_i$  complexes (7), to clamp mitochondrial  $\text{Ca}^{2+}$  ( $[\text{Ca}^{2+}]_{\text{mito}}$ ) at a fixed level (8). This not only permits further  $\text{Ca}^{2+}$  uptake but also renders efflux through the mitochondrial  $\text{Na}^+/\text{Ca}^{2+}$  exchanger (mNCE) independent of total matrix  $\text{Ca}^{2+}$  load (7). The complex nature and impact of  $\text{P}_i$ , nucleotides, or other anions on mitochondrial  $\text{Ca}^{2+}$  dynamics is incompletely understood. Because of the restricted volume of the mitochondrial matrix, compensation for the electrophoretic entry of cations is a thermodynamic requirement. The PiC is regarded as an antiporter of  $\text{H}_2\text{PO}_4^-/\text{OH}^-$ , equivalent to a symport of  $\text{H}_2\text{PO}_4^-/\text{H}^+$  (9, 10) and co-transport of protons has been noted to be an important feature of anions

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<sup>2</sup> The abbreviations used are:  $\text{P}_i$ , inorganic phosphate;  $\text{V}_i$ , inorganic vanadate; mPTP, mitochondrial permeability transition pore; RaM, rapid uptake mode; MCU, mitochondrial  $\text{Ca}^{2+}$  uniporter; PiC, phosphate carrier; ANT, adenine nucleotide translocase; AMP-PNP, 5'-adenylyl imidodiphosphate; TMRM, tetramethylrhodamine methyl ester.

that are most effective at facilitating mitochondrial Ca<sup>2+</sup> uptake (11, 12).

In a recent study in which PiC (SLC25A3) was knocked out in a cardiac-specific manner (13), mitochondrial permeability transition pore (mPTP) activation by Ca<sup>2+</sup> was decreased and Ca<sup>2+</sup>-induced cell death was blunted. However, in that study, some residual P<sub>i</sub> uptake was present, and it was not determined if the maximal mitochondrial Ca<sup>2+</sup> uniporter (MCU) rate in the absence of mPTP opening was altered. In contrast, another recent study showed no effect of knockdown of SLC25A3 on mitochondrial Ca<sup>2+</sup> loading capacity or mPTP sensitivity but an increased cardiac hypertrophic response to pressure overload (14). Other P<sub>i</sub> transporters also exist on the mitochondrial inner membrane. The Ca<sup>2+</sup>-activated ATP-Mg/P<sub>i</sub> carrier, SLC25A23, exchanges MgATP for P<sub>i</sub> (15), and, in a recent study, it was proposed that SLC25A23 interacts with MCU and another accessory protein, MICU1, to regulate mitochondrial Ca<sup>2+</sup> uptake, as evidenced by reduced mitochondrial Ca<sup>2+</sup> uptake after knockdown of SLC25A23 (16).

Several modes of mitochondrial Ca<sup>2+</sup> uptake have been reported in previous work. In addition to the main MCU-mediated uptake, a rapid uptake mode (RaM), activating and inactivating during rapid increases in Ca<sup>2+</sup> near the mitochondria has been reported (17, 18). In addition, we have noted two slow MCU modes of uptake in cardiac mitochondria that displayed different Ca<sup>2+</sup> affinities and Ru360 sensitivities (8), which were also modulated differentially by P<sub>i</sub>. Mode 1 had a high Ca<sup>2+</sup> affinity and low Ru360 sensitivity, while mode 2, comprising the bulk of mitochondrial Ca<sup>2+</sup> uptake, was inhibited by low Ru360 concentrations (8). Extramitochondrial P<sub>i</sub> enhanced mitochondrial Ca<sup>2+</sup> accumulation through mode 1 but resulted in almost complete buffering of Ca<sup>2+</sup> entry through mode 2. Interestingly, we found that mPTP opening was independent of [Ca<sup>2+</sup>]<sub>mito</sub> but was dependent on total mitochondrial Ca<sup>2+</sup> load, leading us to postulate that Ca-P<sub>i</sub> complex accumulation was the trigger for activation of the pore.

To better understand the role of P<sub>i</sub> in modulating mitochondrial Ca<sup>2+</sup> dynamics, here we utilize P<sub>i</sub>-depleted, isolated cardiac mitochondria to directly study the role of anions in mitochondrial Ca<sup>2+</sup> uptake and buffering while monitoring changes in ΔΨ<sub>m</sub>. We show that mitochondrial Ca<sup>2+</sup> uptake occurs through both P<sub>i</sub>-independent and P<sub>i</sub>-dependent pathways, the latter of which could be blocked by inhibition of the PiC. Substitution of other anions led to differential effects on Ca<sup>2+</sup> uptake and buffering, and revealed a novel action of adenine nucleoside triphosphates in a non-hydrolytic role.

## Experimental Procedures

Guinea pig heart mitochondria were isolated using a homogenization protocol on ice, as previously described (19). The homogenized heart suspension was centrifuged in the isolation solution (75 mM sucrose, 225 mM mannitol, 1 mM HEPES, and 1 mM EGTA, pH 7.4) at 480 g for 10 min at 4 °C, and the resulting supernatant was centrifuged at 7,700 × g for 10 min. The mitochondrial pellet was washed at 7,700 × g for 6 min and re-suspended in isolation solution at a concentration of ~20 mg/ml. The protein concentration of isolated mitochondria was determined using the BCA (bicinchoninic acid assay) method.

Endogenous phosphate in the isolated cardiac mitochondria was depleted by utilizing the hexokinase reaction with 0.75 units/ml hexokinase, 1 mM glucose, 0.5 mM ADP, 1 mM MgCl<sub>2</sub>, and 5 mM glutamate/malate in 37 °C for 5 min, as previously described (20).

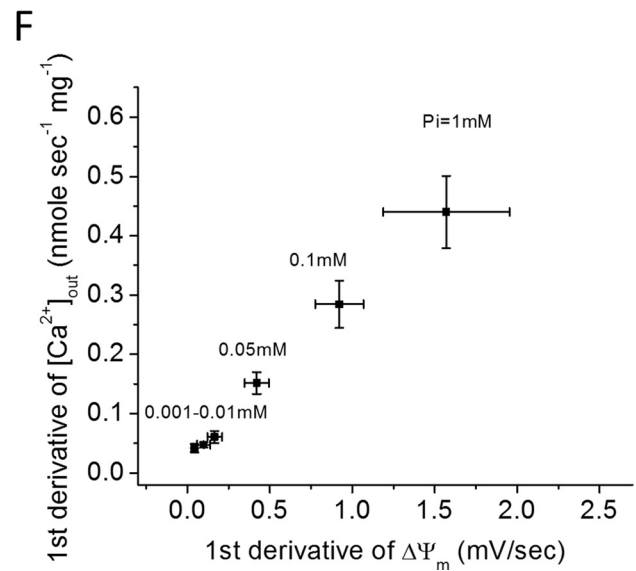
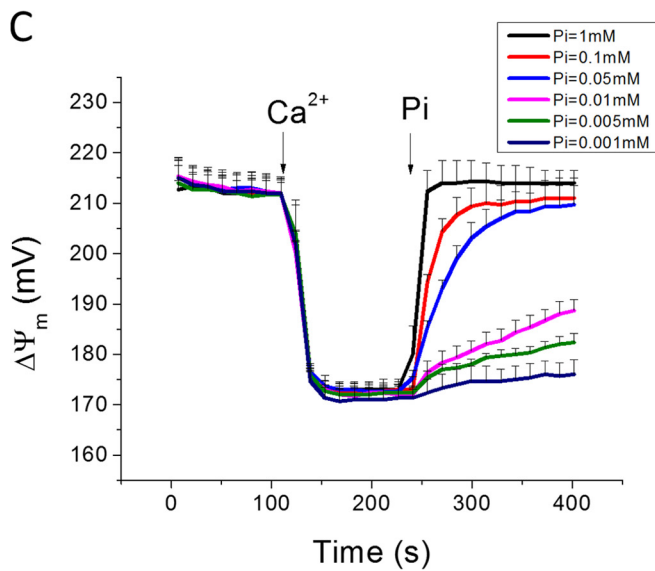
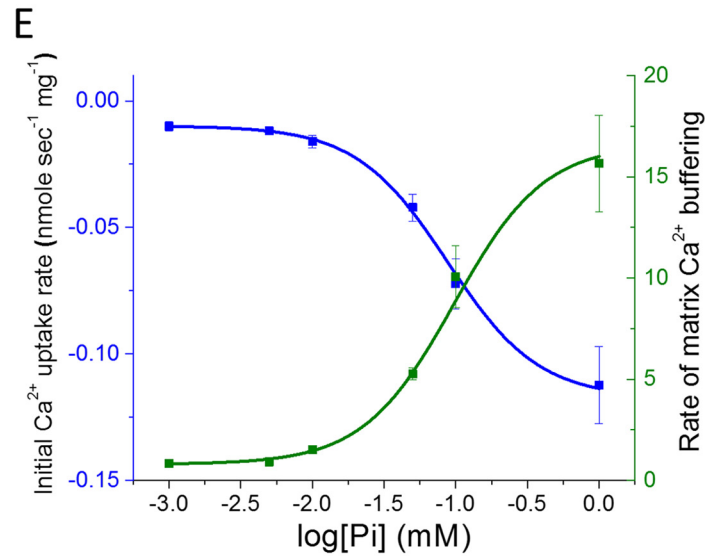
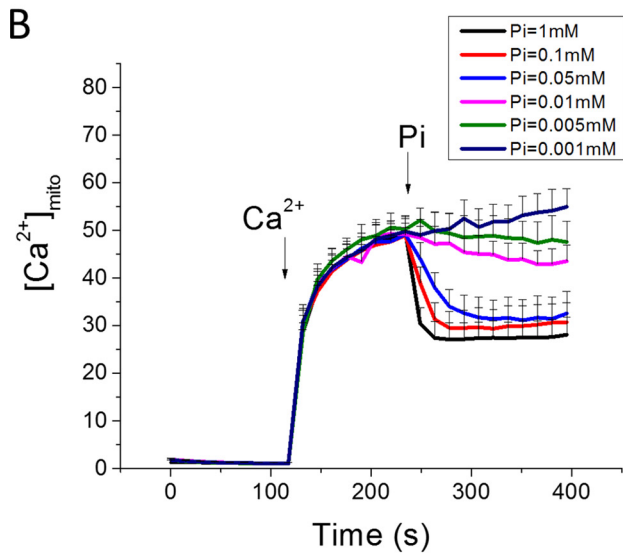
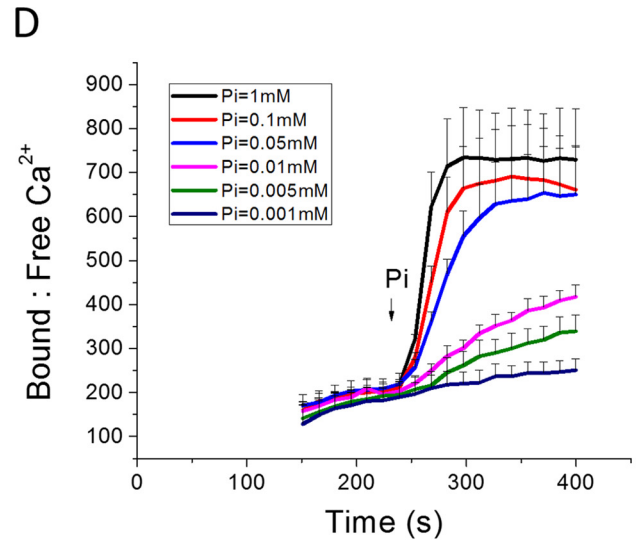
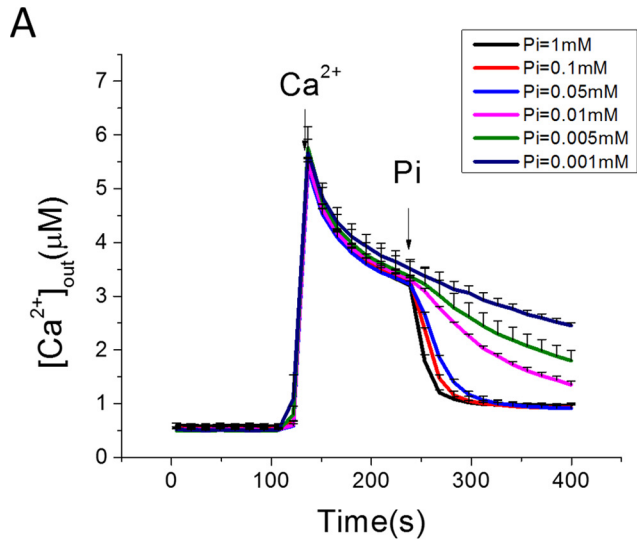
Mitochondria (0.5 mg) were suspended in 2 ml of a potassium-based buffer solution without phosphate (137 mM KCl, 20 μM EGTA, 20 mM HEPES, 5 mM NaCl, 1 μM CsA, and 5 mM glutamate/malate at pH 7.2). Multiple mitochondrial parameters were simultaneously monitored using a wavelength-scanning fluorometer (QuantaMaster; Photon Technology International) at room temperature. The extra-mitochondrial calcium (Ca<sup>2+</sup><sub>out</sub>) was measured with 50 μM CaGreen-5N, hexapotassium salt (505 nm ex.: 535 nm em.). Fura-FF-AM (20 μM fura-FF was incubated for 30 min at room temperature beforehand) was used to monitor intra-mitochondrial calcium (Ca<sup>2+</sup><sub>mito</sub>) (340 nm/380 nm ex.: 510 nm em.). Mitochondrial membrane potential (ΔΨ<sub>m</sub>) was monitored by the ratiometric method with 300 nM tetramethylrhodamine methyl ester (TMRM) (546 nm/573 nm ex.: 590 nm em.), and mitochondria swelling was monitored by 90 degree light scattering (540 nm ex.), as previously described (8, 21).

To measure mitochondrial pH, the succinimidyl ester form of carboxy-SNARF-1 (Life Technologies, Inc.) was loaded into Pi-depleted isolated mitochondria (incubating 30 μM for 30 min at room temperature), then washed twice and resuspended in sucrose-based isolation solution. During the measurement (520 nm ex.: 580/680 nm em.), 0.5 mg of mitochondria were suspended in 2 ml of KCl-based buffer solution without phosphate. The SNARF-1 signal was calibrated in buffer solutions with different pH values (pH 6–8) in the presence of 1 μM FCCP, 20 μg oligomycin, and 10 μM nigericin.

## Results

*Effects of Acute P<sub>i</sub> Addition on Mitochondrial Ca<sup>2+</sup> Dynamics*—In zero P<sub>i</sub> buffer solution, mitochondrial Ca<sup>2+</sup> uptake from the cuvette upon addition of 35 μM Ca<sup>2+</sup> (which increases free Ca<sup>2+</sup> in the cuvette to 7 μM after binding to Ca<sup>2+</sup> buffers present in the solution; Fig. 1A; 120–240 s) was slow and incomplete; nevertheless, [Ca<sup>2+</sup>]<sub>mito</sub> increased monotonically to 50 μM. Acute addition of 1 mM phosphate to the buffer (at 240 s; black trace) resulted in an immediate acceleration of Ca<sup>2+</sup> uptake from the cuvette, but, paradoxically, a decrease in [Ca<sup>2+</sup>]<sub>mito</sub> to ~27 μM (Fig. 1B; black trace). The P<sub>i</sub> effect on Ca<sup>2+</sup> uptake was concentration-dependent and approached a maximum rate at 0.1 mM phosphate. The EC<sub>50</sub> for the P<sub>i</sub> effect on the initial linear Ca<sup>2+</sup> uptake rate was 0.087 mM (Fig. 1E, blue trace). The P<sub>i</sub> effect on buffering, reflected in an increase in the ratio of bound/free matrix Ca<sup>2+</sup> (Fig. 1D), had a similar P<sub>i</sub> dependence, as did the rate of formation of the Ca<sup>2+</sup>-P<sub>i</sub> complex (EC<sub>50</sub> = 0.096 mM; Fig. 1E, green trace). Mitochondrial membrane potential (ΔΨ<sub>m</sub>) was depolarized from ~215 mV to 170 mV in the presence of Ca<sup>2+</sup> without P<sub>i</sub> (Fig. 1C), but when phosphate was added, the decline in [Ca<sup>2+</sup>]<sub>out</sub> was paralleled by restoration of ΔΨ<sub>m</sub> to 210 mV. The rate of recovery of ΔΨ<sub>m</sub> was linearly related to mitochondrial Ca<sup>2+</sup> uptake rate (Fig. 1F). Mitochondrial light scattering decreased slightly upon P<sub>i</sub> addition, indicating low amplitude mitochondrial swelling but no

$P_i$  Effects on Mitochondrial  $Ca^{2+}$



activation of the mitochondrial permeability transition pore (mPTP) during the experiments (data not shown).

Next, we examined the P<sub>i</sub> effect on Ca<sup>2+</sup> uptake for different Ca<sup>2+</sup> additions (20–40 μM) and after adding a fixed concentration of P<sub>i</sub> (0.1 mM; Fig. 2). Recordings of [Ca<sup>2+</sup>]<sub>out</sub> (Fig. 2A), [Ca<sup>2+</sup>]<sub>mito</sub> (Fig. 2B), and ΔΨ<sub>m</sub> (Fig. 2C) reveal that the P<sub>i</sub>-dependent buffering effect takes effect above a certain threshold of matrix Ca<sup>2+</sup> is reached. In the absence of P<sub>i</sub>, [Ca<sup>2+</sup>]<sub>mito</sub> rises to a range of 20–80 μM for total Ca<sup>2+</sup> additions between 20 and 40 μM (extramitochondrial Ca<sup>2+</sup> range of 1–7 μM). When phosphate is added, [Ca<sup>2+</sup>]<sub>mito</sub> is clamped to the same steady state level (~30 μM) for any [Ca<sup>2+</sup>]<sub>out</sub> larger than 2 μM (Fig. 2B). The degree of membrane potential depolarization was proportional to the amount of Ca<sup>2+</sup> added to the cuvette, in accord with the size of the electrochemical gradient for Ca<sup>2+</sup> across the inner membrane, the major determinant of Ca<sup>2+</sup> current (Fig. 2C). Phase plane plots of [Ca<sup>2+</sup>]<sub>mito</sub> versus [Ca<sup>2+</sup>]<sub>out</sub> illustrates the effect of P<sub>i</sub> to lower matrix Ca<sup>2+</sup> to a similar level, despite markedly different loading histories (Fig. 2D, upper panel). In parallel, P<sub>i</sub> transport permitted full ΔΨ<sub>m</sub> repolarization after various Ca<sup>2+</sup> loads were accommodated (Fig. 2D, lower panel).

Mersalyl, a thiol reagent that inhibits the mitochondrial phosphate carrier (22, 23), was used to test whether phosphate regulation of mitochondrial Ca<sup>2+</sup> uptake required transport through PiC (Fig. 3). Mersalyl (10 μM; blue line) partially inhibited Ca<sup>2+</sup> uptake in the absence of P<sub>i</sub>, possibly due to a partial depolarization of ΔΨ<sub>m</sub>, yet [Ca<sup>2+</sup>]<sub>mito</sub> still increased to the same plateau, but at a slightly slower rate. With PiC blocked, when 1 mM phosphate was added, depletion of cuvette [Ca<sup>2+</sup>] was not accelerated, and [Ca<sup>2+</sup>]<sub>mito</sub> buffering did not occur, confirming that PiC-mediated P<sub>i</sub> entry into the matrix was required for both processes.

As we previously reported (8), high capacity (mode 2) Ca<sup>2+</sup> uptake is blocked by a low concentration (50 nM) of Ru360 (Fig. 4A), leaving only mode 1 uptake, detected by the rise in matrix Ca<sup>2+</sup> (Fig. 4B). Inhibiting PiC with mersalyl (10 μM) had little effect on the rate of mode 1 Ca<sup>2+</sup> uptake, suggesting that mode 1 uptake is P<sub>i</sub>-independent; however, mersalyl still inhibited the effect of P<sub>i</sub> on matrix Ca<sup>2+</sup> buffering and ΔΨ<sub>m</sub> recovery (Fig. 4C).

Lehniger (11) previously reported that respiration-dependent Ca<sup>2+</sup> uptake by mitochondria depends on anion transport across the inner mitochondrial membrane, supported only by permeant anions that were also capable of transporting a proton. Acetate anion is transported as the weak acid by passive diffusion with the concomitant release of a proton in the matrix. Acetate (1 mM) was capable of increasing the Ca<sup>2+</sup> uptake rate in P<sub>i</sub>-depleted mitochondria (Fig. 5, blue traces), albeit at a slower rate than a similar concentration of P<sub>i</sub>, most likely due to the slow rate of acetate diffusion across the inner membrane. Increasing the acetate concentration to 30 mM

accelerated the initial Ca<sup>2+</sup> uptake rate to a level close to that of P<sub>i</sub> (Fig. 5, red traces), with much smaller effects on matrix Ca<sup>2+</sup> buffering. The acetate effect on Ca<sup>2+</sup> uptake was not sustained as well as that of P<sub>i</sub>, and was associated with slow depolarization following the initial repolarization phase. The acetate effect was not inhibited by mersalyl treatment (data not shown). Vanadate, a P<sub>i</sub> analog, accelerated Ca<sup>2+</sup> uptake in a manner similar to phosphate, and also strongly supported matrix Ca<sup>2+</sup> buffering to decrease [Ca<sup>2+</sup>]<sub>mito</sub> (Fig. 5, green traces). Notably, mitochondrial Ca<sup>2+</sup> uptake in the presence of vanadate was not accompanied by restoration of ΔΨ<sub>m</sub>, probably due to inhibition of OxPhos by vanadate (24). This finding argues against the idea that the anion-dependent acceleration of Ca<sup>2+</sup> uptake is secondary to an increase in electrochemical driving as ΔpH is converted to ΔΨ<sub>m</sub> (20).

To explore this in more detail, we measured mitochondrial matrix pH ratiometrically (SNARF-1) using the same protocol of Ca<sup>2+</sup> addition followed by anion addition in P<sub>i</sub>-depleted mitochondria (Fig. 6). Prior to Ca<sup>2+</sup> addition, baseline matrix pH was ~7.75 with extramitochondrial pH buffered at 7.2. Ca<sup>2+</sup> addition in the absence of P<sub>i</sub> resulted in matrix acidification to ~7.6. Therefore, ΔpH decreased, rather than increased, during P<sub>i</sub>-independent Ca<sup>2+</sup> uptake, which could have been due to displacement of protons from matrix Ca<sup>2+</sup> binding sites or the coupling of Ca<sup>2+</sup> entry to Na<sup>+</sup>/Ca<sup>2+</sup> and Na<sup>+</sup>/H<sup>+</sup> exchange activity. The addition of P<sub>i</sub>, V<sub>i</sub>, or acetate led to a further decrease in pH to 7.35 during the phase of ΔΨ<sub>m</sub> recovery (Fig. 6). The lack of increase in ΔpH in P<sub>i</sub>-depleted mitochondria during Ca<sup>2+</sup> uptake, and the similar effects of the 3 anions on matrix pH despite differences in the extent of ΔΨ<sub>m</sub> recovery (Fig. 5C), provides further evidence against interconversion of ΔpH to ΔΨ<sub>m</sub> as the primary explanation for the acceleration of MCU rate. It should also be noted that there was still ample membrane potential to drive MCU current both in the absence and presence of P<sub>i</sub> (–170 mV versus –190 mV). Hence, anion entry, not matrix pH change, was the primary facilitator of Ca<sup>2+</sup> uptake.

Nucleotides represent another major physiological anion, hence we investigated their possible effects on mitochondrial Ca<sup>2+</sup> uptake. MgATP (1 mM) accelerated mitochondrial Ca<sup>2+</sup> uptake in the absence of P<sub>i</sub> when added after (Fig. 7A) or prior to (Fig. 7B) the Ca<sup>2+</sup> addition. [Ca<sup>2+</sup>]<sub>mito</sub> level was also decreased, indicating that MgATP could also buffer matrix Ca<sup>2+</sup>. Additional experiments were carried out to further investigate the mechanism of the MgATP effect on P<sub>i</sub>-independent mitochondrial Ca<sup>2+</sup> uptake. The addition of MgCl<sub>2</sub> (1 mM) alone showed only a partial inhibitory effect on mitochondrial Ca<sup>2+</sup> uptake, either in the absence or presence of P<sub>i</sub>, and no effect on matrix buffering (Fig. 7B). Treating the mitochondria with oligomycin (Fig. 8A) did not prevent the MgATP effect, ruling out the possibility that ATP hydrolysis by the F<sub>0</sub>F<sub>1</sub> ATPase could be pro-

FIGURE 1. Concentration-dependent effects of P<sub>i</sub> on mitochondrial Ca<sup>2+</sup> uptake and buffering in cardiac mitochondria. A single Ca<sup>2+</sup> addition (35 μM total CaCl<sub>2</sub> or ~7 μM free calcium) to a suspension of P<sub>i</sub>-depleted guinea pig cardiac mitochondria results in a slow and limited uptake from the cuvette (A); [Ca<sup>2+</sup>]<sub>out</sub> (A), while matrix Ca<sup>2+</sup> (B); [Ca<sup>2+</sup>]<sub>mito</sub> rises with fast and slow components. Addition of various P<sub>i</sub> concentrations (0.001–1 mM NaH<sub>2</sub>PO<sub>4</sub>) accelerated Ca<sup>2+</sup> uptake (A) but decreased [Ca<sup>2+</sup>]<sub>mito</sub> (B), reflecting an increase in matrix bound:free Ca<sup>2+</sup> (D). Mitochondrial inner membrane potential (ΔΨ<sub>m</sub>) depolarizes and recovers in parallel with the Ca<sup>2+</sup> and P<sub>i</sub> additions, respectively (C). E, concentration dependence of the P<sub>i</sub> effect on Ca<sup>2+</sup> uptake (blue) and buffering (green) rates, with saturation at ~0.1 mM P<sub>i</sub>. F, linear relationship between the rate of change of [Ca<sup>2+</sup>]<sub>out</sub> and ΔΨ<sub>m</sub> measured as the first derivative of the signals for first 15 s after the P<sub>i</sub> addition. (Data in panels A–E represent mean ± S.E. for n = 3 experiments; panel F, n = 5).

*P<sub>i</sub>* Effects on Mitochondrial Ca<sup>2+</sup>

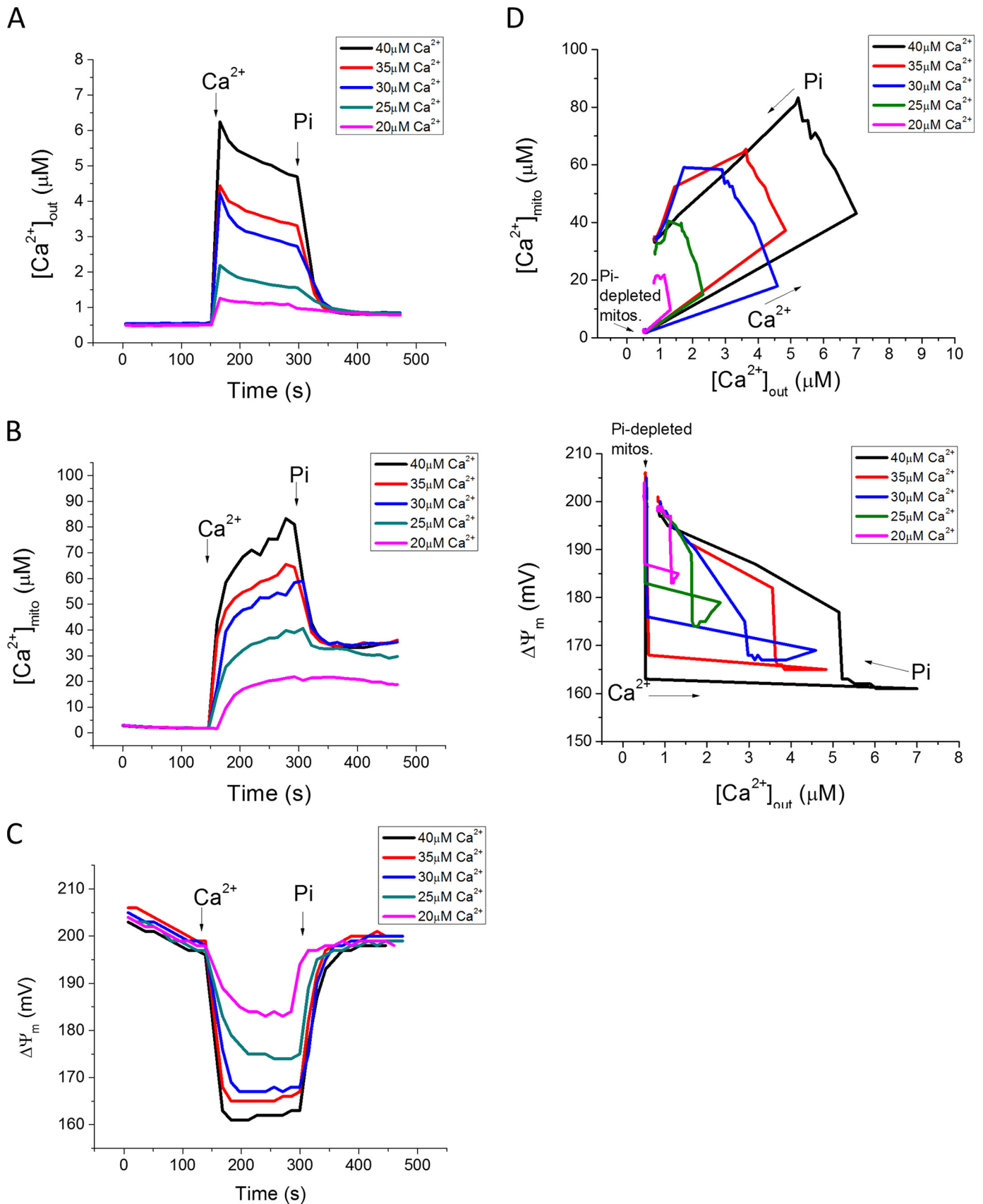


FIGURE 2. **P<sub>i</sub> uptake is required to clamp [Ca<sup>2+</sup>]<sub>mito</sub> to a setpoint.** A, Ca<sup>2+</sup> additions to P<sub>i</sub>-depleted mitochondria in the range of 20–40 μM (at 150 s) were followed by 0.1 mM P<sub>i</sub> (at 300 s) to initiate Ca<sup>2+</sup> uptake and buffering. B, increases in [Ca<sup>2+</sup>]<sub>mito</sub> exceeding 30 μM in the absence of P<sub>i</sub> were quickly clamped back to 30 μM upon P<sub>i</sub> addition, regardless of total mitochondrial Ca<sup>2+</sup> load. C, ΔΨ<sub>m</sub> changes during the protocol. D, phase-plane analysis of [Ca<sup>2+</sup>]<sub>out</sub> versus [Ca<sup>2+</sup>]<sub>mito</sub> (upper) and [Ca<sup>2+</sup>]<sub>out</sub> versus ΔΨ<sub>m</sub> (lower) before and after P<sub>i</sub> addition.

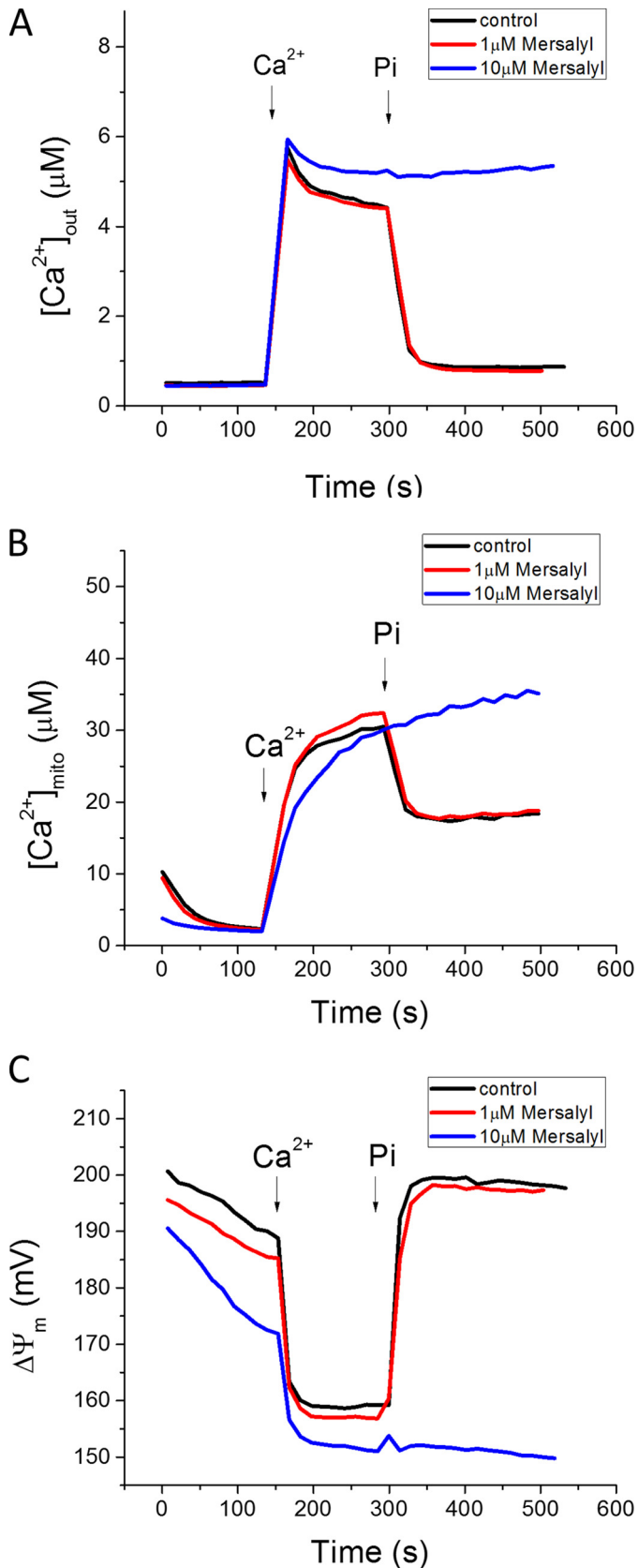


FIGURE 3. **P<sub>i</sub>C inhibition blocks acceleration of Ca<sup>2+</sup> uptake and matrix Ca<sup>2+</sup> buffering.** 10 μM (blue), but not 1 μM (red), mersalyl inhibited the P<sub>i</sub> effect on mitochondrial Ca<sup>2+</sup> uptake (A) and buffering (B). C, ΔΨ<sub>m</sub> was partially depolarized in the presence of 10 μM mersalyl, which may account for the somewhat slower initial P<sub>i</sub>-independent Ca<sup>2+</sup> uptake kinetics.

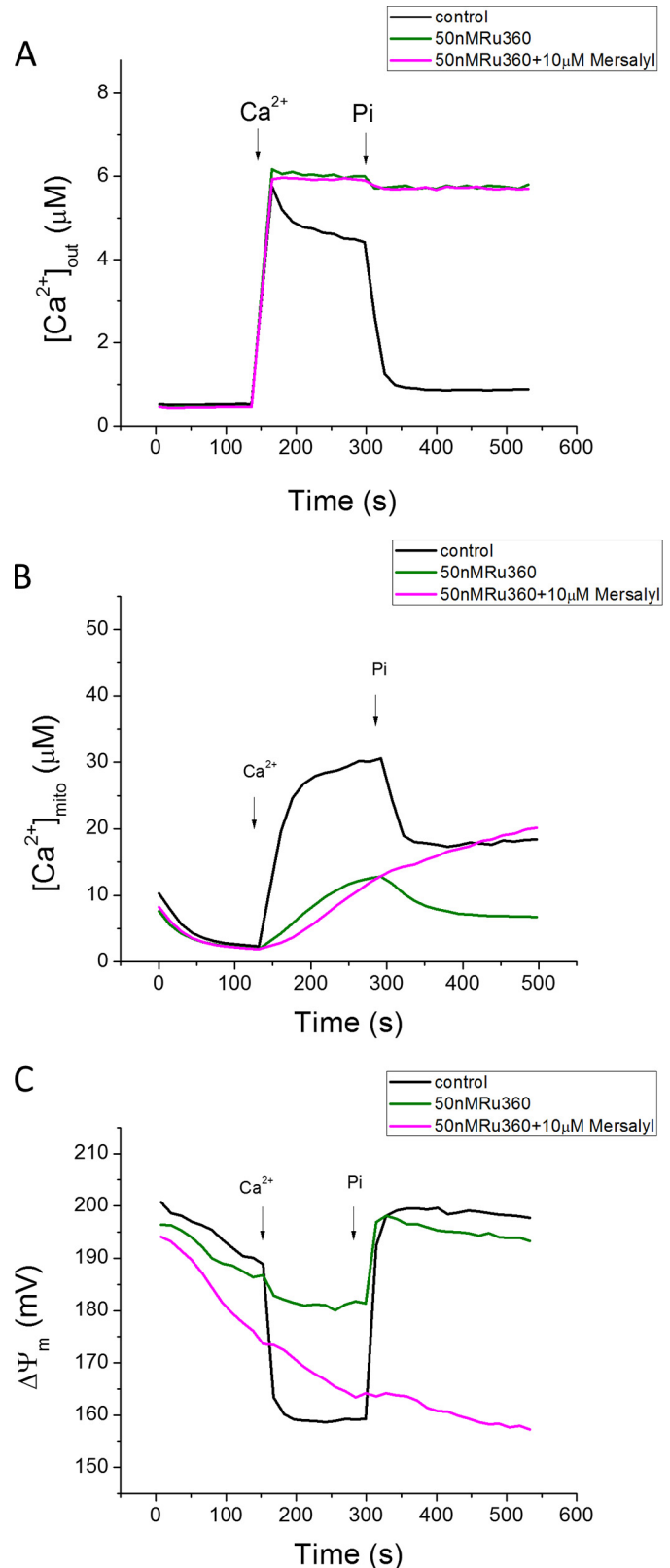


FIGURE 4. **Effects of P<sub>i</sub> and mersalyl on mitochondrial Ca<sup>2+</sup> transport in the presence of Ru360.** A, with bulk Ca<sup>2+</sup> uptake (mode 2) inhibited with Ru360 (50 nM), remaining [Ca<sup>2+</sup>]<sub>mito</sub> increase (mode 1) was not inhibited by mersalyl, although the P<sub>i</sub> effect on buffering was still blocked (B). C, ΔΨ<sub>m</sub> responses.

## $P_i$ Effects on Mitochondrial $Ca^{2+}$

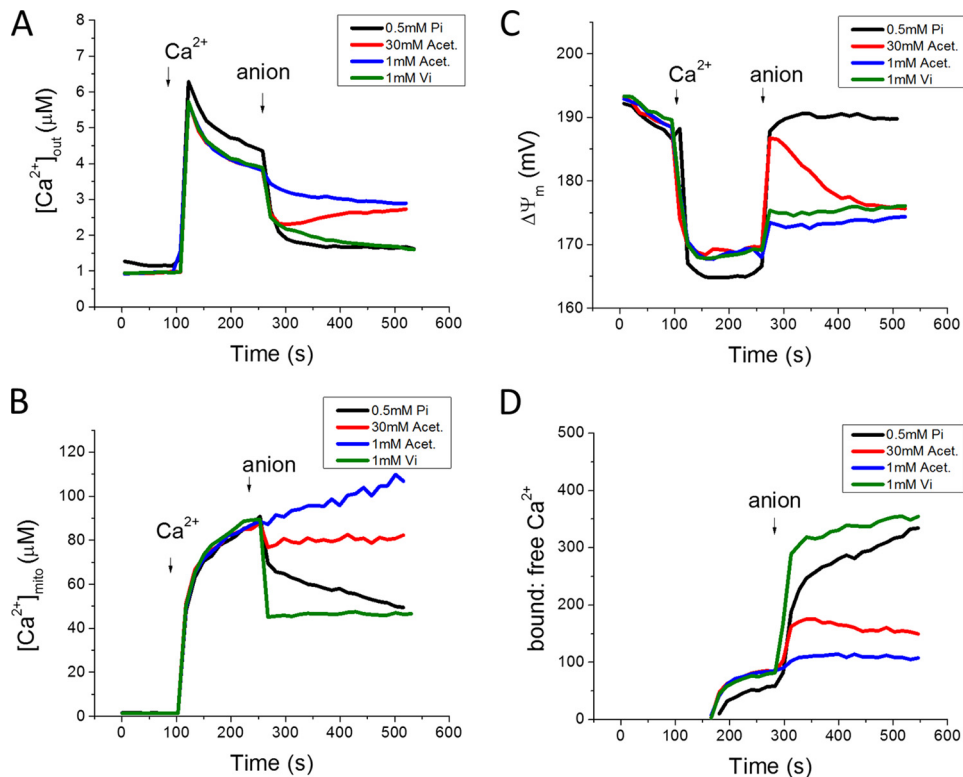


FIGURE 5. Anions acetate, vanadate, and phosphate show different effects on mitochondrial  $Ca^{2+}$  dynamics. Phosphate (0.5 mM  $P_i$ , black), acetate (1, blue or 30 mM Acet., red), or vanadate (1 mM  $V_i$ , green) were added at 240 s to phosphate-depleted mitochondria after a  $35 \mu M$   $Ca^{2+}$  addition.  $[Ca^{2+}]_{out}$  (A),  $[Ca^{2+}]_{mito}$  (B),  $\Delta\Psi_m$  (C),  $Ca^{2+}$  bound-to-free ratio (D).

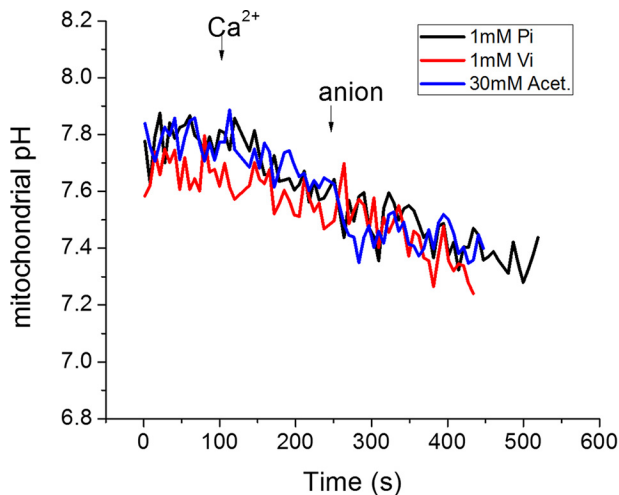


FIGURE 6. Mitochondrial pH measurement in  $P_i$ -depleted mitochondria. Mitochondrial pH was measured using the ratiometric pH indicator carboxy-SNARF-1. Mitochondrial pH decreased to a similar extent after the  $Ca^{2+}$  addition and after anion addition regardless which anion was used.  $40 \mu M$   $Ca^{2+}$  was first added, followed by 1 mM  $P_i$  (or 1 mM  $V_i$  or 30 mM acetate), as indicated.

viding matrix  $P_i$ . The ATP effect was also not impacted by blocking the adenine nucleotide translocase with bongkreikic acid (Fig. 8B) or carboxyatractyloside (data not shown), and ADP was incapable of accelerating the  $Ca^{2+}$  uptake rate (Fig. 8B).  $P_i$  inhibition also had no effect on the MgATP facilitation of  $Ca^{2+}$  uptake (Fig. 8C).

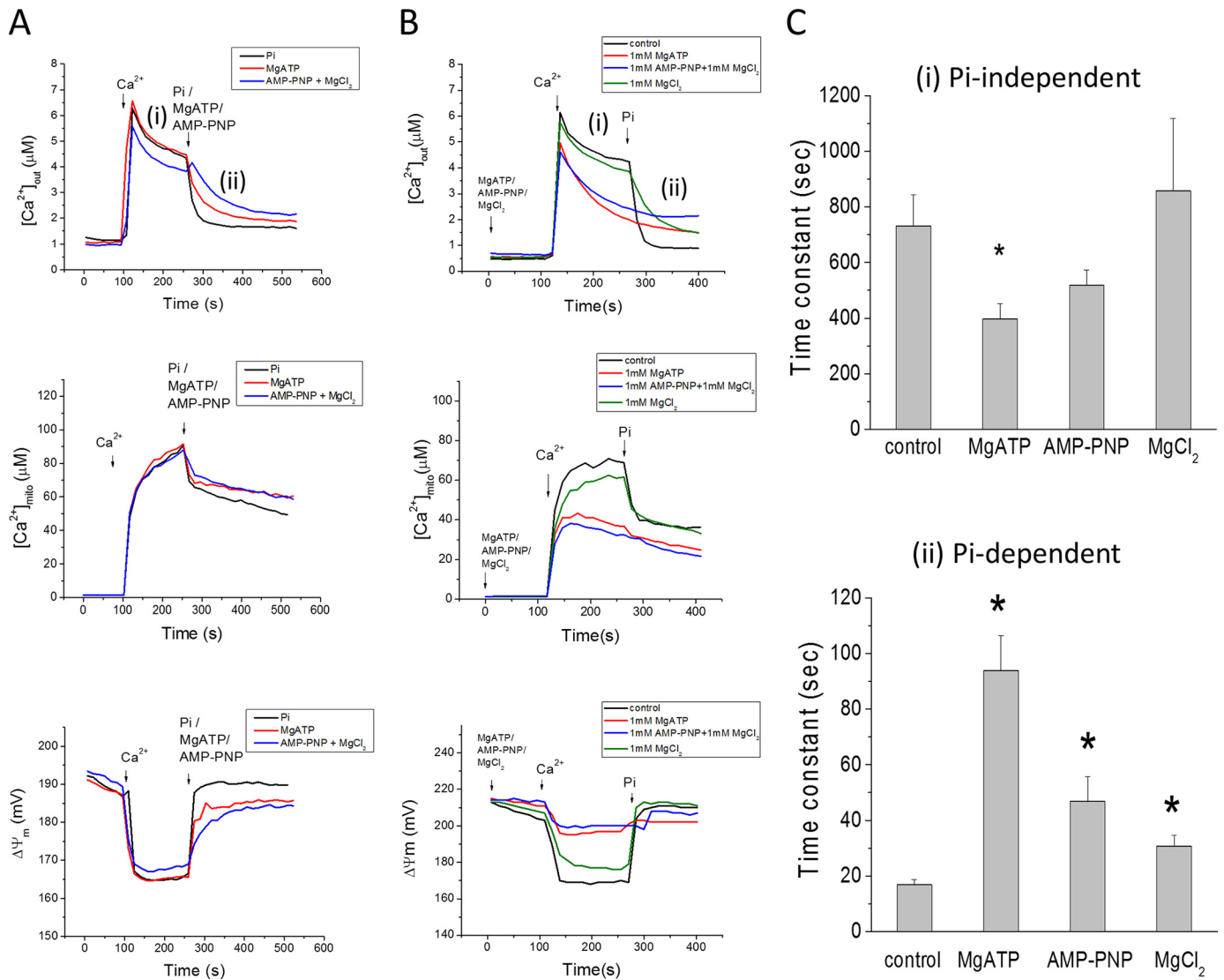
Finally, the non-hydrolyzable ATP analog, AMP-PNP, was shown to have a similar effect on mitochondrial  $Ca^{2+}$  dynamics

as MgATP (Fig. 7), *i.e.* increased  $Ca^{2+}$  uptake rate and decreased  $[Ca^{2+}]_{mito}$ . These data indicate that ATP facilitates mitochondrial  $Ca^{2+}$  uptake through a novel direct effect of the molecule itself, presumably requiring nucleoside triphosphate uptake by a non-canonical transporter, since matrix  $Ca^{2+}$  buffering was also increased by ATP.

## Discussion

The present study quantitatively investigated the fundamental role of  $P_i$  transport on mitochondrial  $Ca^{2+}$  uptake and buffering by monitoring extra- and intra-mitochondrial  $Ca^{2+}$  and  $\Delta\Psi_m$ . The major findings were that  $P_i$  directly facilitates mitochondrial  $Ca^{2+}$  uptake in a concentration-dependent manner while simultaneously buffering  $[Ca^{2+}]_{mito}$  to a fixed setpoint. Using  $P_i$ -depleted mitochondria, a novel regulatory mechanism involving MgATP was also revealed, whereby it increased mitochondrial  $Ca^{2+}$  uptake. The MgATP effect did not require ATP hydrolysis. The results demonstrate that there is a strict dependence of maximal MCU, as well as  $[Ca^{2+}]_{mito}$ , on anion flux rate, highlighting the regulatory complexity of cardiac mitochondrial  $Ca^{2+}$  dynamics.

The ability of mitochondria to accumulate massive amount of  $Ca^{2+}$  has been known for more than fifty years (3, 14, 25). While previous work established that  $P_i$  increases mitochondrial  $Ca^{2+}$  loading (11, 26) and participates in mitochondrial  $Ca^{2+}$  buffering to clamp matrix  $Ca^{2+}$  at a limiting setpoint (21, 27), the dual role of  $P_i$  has not been studied quantitatively in energized cardiac mitochondria while measuring changes in total  $Ca^{2+}$  uptake, matrix  $Ca^{2+}$ , and  $\Delta\Psi_m$  in parallel. The protocol used here uniquely permitted the study of both the  $P_i$ -de-



**FIGURE 7. MgATP accelerates mitochondrial Ca<sup>2+</sup> uptake in P<sub>i</sub>-depleted mitochondria.** *A*, acute addition of either 0.5 mM P<sub>i</sub> (black), 1 mM MgATP (red), or 1 mM Li<sup>+</sup>-AMP-PNP/MgCl<sub>2</sub> (blue), added after Ca<sup>2+</sup>, accelerates mitochondrial Ca<sup>2+</sup> uptake. Ca<sup>2+</sup> (35 μM) was added at 100 s to initiate P<sub>i</sub>-independent Ca<sup>2+</sup> uptake (i); 1 mM P<sub>i</sub> was added at 270 s to initiate the P<sub>i</sub>-dependent phase (ii). *B*, Ca<sup>2+</sup> uptake rate after pre-incubation with MgATP, AMP-PNP or MgCl<sub>2</sub>, added 120 s before Ca<sup>2+</sup>. Notably, P<sub>i</sub> (1 μM) did not accelerate Ca<sup>2+</sup> uptake when mitochondria were preincubated with MgATP or MgAMP-PNP. *C*, summary of the effects of MgATP, AMP-PNP or MgCl<sub>2</sub> on Ca<sup>2+</sup> uptake. Data in *C* are presented as mean ± S.E. *n* = 10, 8, 4, and 4 for the 4 groups shown. \*: *p* < 0.05. The kinetics of extra-mitochondrial Ca<sup>2+</sup> ([Ca<sup>2+</sup>]<sub>out</sub>) from panel *B* were fitted using exponential functions to obtain time constants during the P<sub>i</sub>-independent and P<sub>i</sub>-dependent Ca<sup>2+</sup> uptake phases. MgATP and AMP-PNP accelerated P<sub>i</sub>-independent Ca<sup>2+</sup> uptake rates, while MgCl<sub>2</sub> slightly prolonged Ca<sup>2+</sup> uptake only in the presence of P<sub>i</sub>. For phase (i), P<sub>i</sub>-independent uptake, a double exponential was employed: [Ca<sup>2+</sup>]<sub>out</sub>(*t*) = A<sub>fast</sub>[exp(-*t*/τ<sub>fast</sub>) + A<sub>slow</sub>[exp(-*t*/τ<sub>slow</sub>)]. A<sub>fast</sub> and A<sub>slow</sub> are the maximum amplitude; τ<sub>fast</sub> and τ<sub>slow</sub> are the time constants of the fast and slow components of exponential decay, respectively. Only the slow decay time constants are plotted for different treatments. In phase (ii), the [Ca<sup>2+</sup>]<sub>out</sub> was fitted by a single exponential function [Ca<sup>2+</sup>]<sub>out</sub>(*t*) = A[exp(-*t*/τ) + C.

pendent and P<sub>i</sub>-independent components of mitochondrial Ca<sup>2+</sup> uptake and defined the efficacy of the anion for activation of uptake *versus* buffering. P<sub>i</sub> and V<sub>i</sub> were approximately equally effective in supporting both functions, while acetate facilitated uptake but had little effect on matrix buffering.

ATP has been shown to participate in regulating mitochondrial Ca<sup>2+</sup> accumulation. It was first reported by Vasington and Murphy (3), and DeLuca and Engstrom (25) that ATP was necessary for the uptake of Ca<sup>2+</sup>. In the former study, P<sub>i</sub> or ATP enhanced, and respiratory inhibitors or uncouplers inhibited, “active” Ca<sup>2+</sup> uptake, while in the latter study, it was concluded that neither P<sub>i</sub> nor coupled respiration was required for Ca<sup>2+</sup> uptake/binding (25). However, these studies did not take into account possible effects of Mg<sup>2+</sup>, ATP, P<sub>i</sub>, or even substrate

availability on the electrochemical driving force for Ca<sup>2+</sup> uptake (indeed, this work took place prior to wide acceptance of the chemiosmotic hypothesis). Later, Carafoli and Lehninger showed that ATP (or ADP) is taken up along with Ca<sup>2+</sup> and P<sub>i</sub> to form hydroxyapatite-like precipitates in the mitochondrial matrix. Without the uptake of ATP (or ADP), no granules were formed (5). Weinbach and Von Brandt then found that the granules contained adenine nucleotides (28). The possible co-precipitation of Ca-P<sub>i</sub> and nucleotide was, therefore, a potential explanation of why ATP accelerated mitochondrial Ca<sup>2+</sup> uptake. Our findings show that, independent of P<sub>i</sub>, ATP, but not ADP, can regulate mitochondrial Ca<sup>2+</sup> uptake and buffering, and that hydrolysis is not required. The transporter mediating this effect, and whether ATP buffers by



## P<sub>i</sub> Effects on Mitochondrial Ca<sup>2+</sup>

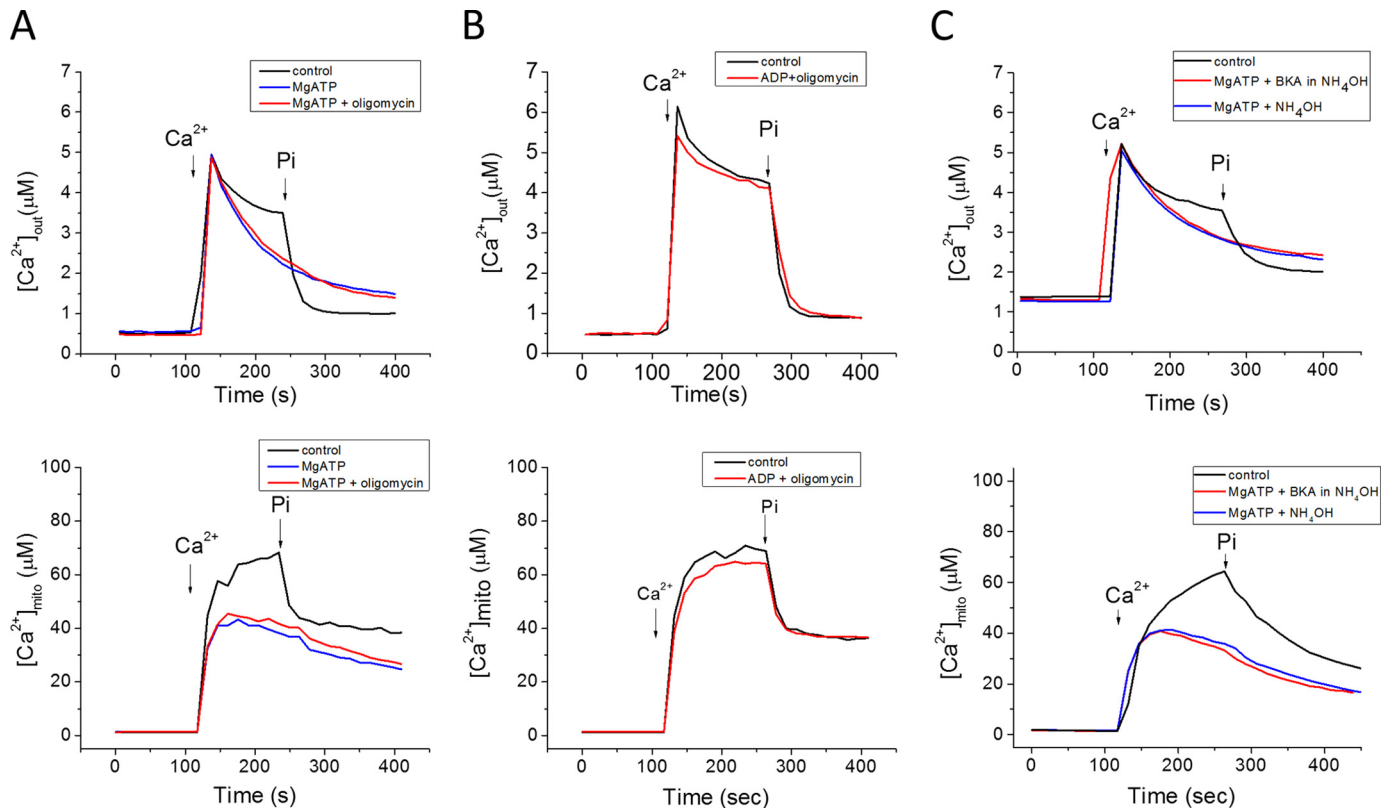


FIGURE 8. **ATP effects were not altered by inhibition of ANT or the mitochondrial ATP synthase.** A, oligomycin (ATP synthase inhibitor) pretreatment did not alter MgATP facilitation of P<sub>i</sub>-independent Ca<sup>2+</sup> uptake. B, ADP did not accelerate P<sub>i</sub>-independent Ca<sup>2+</sup> uptake. C, bongkrekic acid (BKA; ANT inhibitor) did not alter the ATP response.

forming a high affinity complex with Ca<sup>2+</sup>, remains to be determined.

Recent studies have confirmed that MCU is a selective Ca<sup>2+</sup> channel (29) comprised of a defined pore subunit (MCUa) (30, 31). In most studies, it is assumed that maximal MCU rates are a function of the pore's properties, regulated by accessory proteins in the Ca<sup>2+</sup> uptake complex (e.g. MCUb (32), MICU1 and MICU2 (33–36), MCUR (37), EMRE (38)). However, our findings in intact mitochondria demonstrate that the maximal Ca<sup>2+</sup> uptake rate is limited by the anion transport rate. This effect is masked under physiological conditions because P<sub>i</sub> is usually at saturating concentrations with respect to effect on Ca<sup>2+</sup> uptake (EC<sub>50</sub> of P<sub>i</sub> = 87.5 μM). Interestingly, the [Ca<sup>2+</sup>]<sub>mito</sub> level was buffered and reached a steady state near 20–30 μM when the phosphate concentration was > 0.01 mM (Fig. 1 B) or when [Ca<sup>2+</sup>]<sub>out</sub> level was > 2 μM (Fig. 2). This calcium-phosphate buffering effect allows estimation of the buffering threshold; however, even though the extramitochondrial phosphate concentration required for calcium buffering was ~0.01 mM, [P<sub>i</sub>]<sub>mito</sub> may not necessarily be equal to [P<sub>i</sub>]<sub>out</sub>. In this regard, employing phosphorous NMR spectroscopy, Garlick *et al.* (39, 40) reported that mitochondrial P<sub>i</sub> concentration was 2.5× the cytoplasmic level in intact hearts (~6 mM). In contrast, in solution, the calcium-phosphate complex only forms when calcium is in the millimolar range (K<sub>sp</sub> = 3 × 10<sup>-30</sup> for Ca<sub>3</sub>(PO<sub>4</sub>)<sub>2</sub>) (20), a Ca<sup>2+</sup> concentration at least an order of magnitude higher than we measured either outside or inside the mitochondria.

The method described here also provides an indirect way of measuring phosphate influx since the mitochondrial Ca<sup>2+</sup> uptake rate is proportional to the phosphate concentration and sensitive to the phosphate carrier inhibitor. By assuming 1:1 or 1:1.5 P<sub>i</sub>:Ca transport stoichiometry (27), we could approximate the phosphate flux to be around 0.5–1 nmol/mg/sec at 1 mM [P<sub>i</sub>], and this rate is close to the range of the reported phosphate transport rate in the rat liver mitochondria at 2 mM, which was determined by the inhibitor stop method with <sup>32</sup>P at 0 °C (41). In keeping with the overall hypothesis that anion flux limits Ca<sup>2+</sup> uptake, this maximum P<sub>i</sub> transport rate corresponded to the maximum MCU rates previously reported for guinea pig cardiac mitochondria (21).

Phosphate is known to play a role in regulating mitochondrial Ca<sup>2+</sup> and function. It has previously been reported that P<sub>i</sub> is required for bulk mitochondrial Ca<sup>2+</sup> uptake (42). Possible mechanisms of phosphate facilitation of Ca<sup>2+</sup> uptake could be explained by (i) precipitation of mitochondrial Ca<sup>2+</sup> by forming a Ca-P<sub>i</sub> complex to maintain the electrochemical driving force for Ca<sup>2+</sup>, (ii) the requirement for co-transport of an anion via PiC with Ca<sup>2+</sup> to maintain charge balance (supported by the acetate result), or (iii) direct interaction with Ca<sup>2+</sup> transporters. In the current study, we confirmed that phosphate participates in clamping mitochondrial [Ca<sup>2+</sup>]<sub>mito</sub> level to maintain a Ca<sup>2+</sup> gradient for Ca<sup>2+</sup> uptake. Dissipation of the proton gradient by phosphate influx was unlikely to be the main reason for enhancing Ca<sup>2+</sup> uptake, since V<sub>i</sub> could equally increase uptake without restoring ΔΨ<sub>m</sub> (Fig. 5C).

Mitochondrial matrix or extramitochondrial P<sub>i</sub>, by themselves, were probably not direct allosteric regulators of the mitochondrial calcium uniporter because concomitant P<sub>i</sub> influx was absolutely required to maintain fast Ca<sup>2+</sup> uptake. The PiC has also been implicated in the regulation of mPTP opening to modulate cell death (13, 43); however, whether the mechanism is through a direct PiC-mPTP interaction or merely the result of a loss of P<sub>i</sub> influx to regulate matrix Ca<sup>2+</sup>, or the P<sub>i</sub>-Ca<sup>2+</sup> complex, is unclear. To verify the importance of P<sub>i</sub> in regulating mitochondrial Ca<sup>2+</sup> dynamics, further testing on PiC knockdown cells or animals (13, 16) would be helpful to understand the molecular basis of the P<sub>i</sub>-dependent process described herein.

Nucleotide effects on mitochondrial Ca<sup>2+</sup> uptake have been reported previously (44); however, ATP or AMP-PNP were shown to inhibit the uniporter from a site on the outside of the inner membrane. Thus, the effect of ATP to increase P<sub>i</sub>-independent Ca<sup>2+</sup> uptake shown here has not been observed before. The nature of the ATP transporter involved remains to be determined, as we ruled out adenine nucleotide translocase or the ATP synthase as contributors to the mechanism. An ATP-Mg/P<sub>i</sub> carrier (SLC25A23) has also been described in cardiac mitochondria, representing another possible anion influx pathway. Knockdown of this exchanger was recently shown to impact mitochondrial Ca<sup>2+</sup> dynamics (16), but it is unclear how this ATP/P<sub>i</sub> antiporter would be able to function in the P<sub>i</sub>-depleted mitochondria used in the present study.

In conclusion, these findings support a major role for anion influx in determining the maximal Ca<sup>2+</sup> influx rate and matrix Ca<sup>2+</sup> concentration in cardiac mitochondria. P<sub>i</sub> uptake is required for maximal enhancement of MCU rate, as well as maximal buffering capacity. ATP is not strictly required for Ca<sup>2+</sup> uptake, but facilitates P<sub>i</sub>-independent uptake (ADP does not substitute). The Ca-P<sub>i</sub> buffer system clamps the free Ca<sup>2+</sup> at an upper limit, allowing massive accumulation of Ca<sup>2+</sup> without increasing the efflux rate or diminishing the electrochemical driving force for entry. The mitochondria are therefore able to regulate metabolism via Ca<sup>2+</sup> sensing and also can act as a cellular Ca<sup>2+</sup> sink when there is a chronic, potentially pathological, increase in extramitochondrial Ca<sup>2+</sup>. Notably, we show that the first role is modulated by the P<sub>i</sub> effect on Ca<sup>2+</sup> uptake, effectively incorporating P<sub>i</sub>, which also rises with energy demand, into the sensing process. Considering that P<sub>i</sub>, ATP, and Ca<sup>2+</sup> dynamics are altered under metabolic stress, it will be important to define how the two effects of P<sub>i</sub> contribute to the pathophysiology of cardiac disease.

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